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\*\* CONTINUING DATA \*\*\*\*\* *See*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *See**NONE*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 14	TOTAL CLAIMS SQ 14	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>See</i>	<i>See</i>			
	Examiner's Signature	Initials			

## ADDRESS

30449

## TITLE

AIR-GAP INSULATED INTERCONNECTIONS

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